

2014 AQUATICS

P.O. Box 18224 ~ Shreveport, LA 71138 <u>www.rocksolidsports.com</u> ~ 318.402.7242 <u>LESSONS FOR BILL COCKRELL</u>

Child's Information

Name	D.O.B	Se	eX
Parent's Information			
Name	D.O.B	Sex	
Address Home Phone ()	Ci	ty	Zip
Email			
Please Select Time, Age Group & Session:			
<u>Age Group</u>		<u>Session Time</u>	
6 Months-2 Years With Parents		8:00AM-8:50AM	
3 Years With Parents		9:00AM-9:50AM	
3 Years Without Parents		6:00PM-6:50PM	
4-6 Years Old			
7-12 Year Olds			
Adult (13 Years -	+)		
Available Sessions		<u>Price</u>	
Session 1: June 2	2-4, June 9-11	(\$60)	All sessions are Monday-Thursday
Session 2: June	16-18, June 23-25	(\$60)	with makeup times on Friday!!!
Session 3: June 30-	July 2, July 7-9	(\$60)	For private lessons call
Session 4: July 14	4-16, July 21-23	(\$60)	318-402-7242 \$30/45 min

I verify that I am the parent/legal guardian of the above participant and that he/she has my permission to participate in Rock Solid Aquatics. I hereby authorize the staff and volunteers of Rock Solid to act for me according to their best judgment in any emergency requiring medical attention. I understand that Rock Solid carries no medical, dental or accident insurance on participants and I agree to assume full responsibility for any medical or dental treatment resulting from participation in any Rock Solid, SPAR or Calvary Programs. I understand and agree that the above named is voluntarily participating in the Rock Solid programs at his/her risk. I agree to assume full responsibility for any damages or injuries to him/her in this program and related activities. I hereby fully and forever exonerate and discharge Rock Solid, it's staff, volunteers, directors, officers and agents from any and all claim, demands, damages, rights of action, present or future, whether the same be anticipated or unanticipated, resulting from or arising out of participation of this program.